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And now the telling of...

Breaking the Generational Cycle: A Point of Intervention for College Student Children of Alcoholics

Katie Walker

Assigned in COM 590: Health Communication Across the Lifespan (Dr. Lauren Amaro)

"Isn't that your fourth cup, dad?" A young girl curiously asks her father, counting the number of times he pours another glass of wine. "Why does he drink so much?" She asks herself. This inquiry is common amongst children of alcoholics (COAs) with their intrinsic desire to understand why their parent(s) depends on a drink, and why that drink often turns into two, three, and sometimes four or more. From the child's perspective, this observed behavior can be learned as a coping mechanism when stress arises in their life, thus leading to the importance of carrying out an intervention for children under such circumstances. By having COAs engage in an established and successful intervention program in order to cease the possibility of developing a reliance on alcohol themselves for means of coping in stressful situations, they will be more equipped to break the generational cycle of alcoholism.

Living in a home where a dependence on alcohol from a parent is an issue is a stressful predicament for any child. "Being raised in a household with an alcoholic parent is one of the most prevalent stressful conditions experienced by children" (Roosa, M., W. et al., 1989, p. 295) that naturally accompanies alcoholism being the most prevalent mental health problem of adults in the United States (Robins et al., 1984). Research has shown that, in comparison to their peers, COAs in particular are at an increased risk for depression, anxiety, lower self-esteem, and heavy drinking or alcoholism (Roosa, M., W. et al., 1989) in addition to developing a range of negative social and psychological outcomes, including problematic

substance use (Kumpfer 1987; Forrester 2000; Advisory Council on the Misuse of Drugs (ACMD) 2003) by the time they are college students. Moreover, when there is alcohol abuse in the family, there is also a risk of dysfunctional coping strategies that may lead children to use drinking as an adaptive behavior when they grow up (Wilson and Orford, 1978; Wolin et al., 1980; Schor, 1996). Because many COAs experience higher than usual levels of stress in their families, "one of the major difficulties that they face is determining what, if anything, they can do in a given situation to reduce the stress they experience" (Roosa, M., W., Gensheimer, L., K., Short, J., L., Ayers, T., S., Shell, R., 1989, p. 296).

Each of these studies remarks call for a point of intervention, or researched activity designed to discontinue an unhealthy behavior and encourage a new and healthier one, to be implemented in aiding this issue and stopping the generational cycle of using alcohol at a young age in order to cope with stress. For this reason, existing literature pertaining to a particular point of intervention on this topic will be discussed, along with concerns of injustice and diversity inherent to the topic and spiritual and faith-based approaches on how to manage stress in a healthy way when one is a college student COA.

Review of Literature

There have been a number of organized interventions that focus on preventing COAs from following in their parent(s)' footsteps in obtaining alcoholic tendencies and behaviors. Their ability to

cope, or apply different strategies for handling specific problematic situations, specifically related to how they handle difficult circumstances related to their parents' abuse (Hansson, Runderberg, Zetterlind, Johnsson, Berglund, 2006), is the overarching skill that many interventions aim to seek in educating the COAs who go through their program(s). Because, "students who show deficiencies in coping skills are more likely to use alcohol as a coping device" (Moos et al., 1990; Kassel et al., 2000), there is a need for interventional measures to be taken. For instance, several studies have reported the importance of intervention for COAs who are young adults. "Published studies with college students as the target group indicate that brief motivational intervention leads to reduced drinking and alcohol-related problems" (Baer et al., 1992, 2001; Borsari and Carey, 2000; Larimer et al., 2001; Murphy et al., 2001), transitioning into the point of intervention that will be synthesized.

Point of Intervention

Brief Alcohol Screening and Intervention for College Students, or BASICS, is an intervention program that consists of two individual sessions with some components based on motivational interviewing (Hansson, Runderberg, Zetterlind, Johnsson, Berglund, 2006), a counseling style centered around the student to elicit change in their behavior by helping them understand and resolve their ambivalence towards the topic through goal-setting. For the purpose of this particular point of intervention, motivational interviewing (employed through the BASICS program) is used in order to reduce risky alcohol consumption and negative consequences. Previous studies on BASICS have illustrated that the program can help reduce these negative consequences among college populations as well as both the quantity and frequency of alcohol use (Amaro, H., Reed, E., Rowe, E., Picci, J., Mantella, P., Prado, G., 2010). Although the program is not

specifically designed solely for student COAs, research studies have shown the effectiveness of COAs (who are prone to exhibiting alcoholic tendencies and behaviors in college settings) participating in such a program.

One study in particular by Amaro et al. in 2010, applied a BASICS intervention consisting of two sessions (each within 45 to 60 minutes in length) for recruited COA students who sought medical or mental health care through the University Health and Counseling Services at an urban university in Boston, Massachusetts. The first session focused on gathering information about the student's alcohol use by providing self-monitoring cards for the student to complete by the following interview. During the second session, the student and nurse reviewed the self-monitoring cards and the personalized feedback packet together, which included data on the student's "alcohol consumption, perceptions of other students' drinking compared to actual data, blood alcohol content, beliefs about alcohol, consequences, risk factors, and the readiness ruler," (Amaro et al., 2010, p. 358). The readiness ruler asked the students to rate their motivation, or readiness, to alter any aspect of their drinking behavior using the Readiness to Change 10-point Likert scale and to explain their reasons for change.

All of these beneficial tools were collectively reviewed at the end of the second session when students were given back their feedback packets. These encompassed the goals they had set for "reducing their drinking and drug use, strategies they had chosen to achieve these goals, and local service resources should they choose to use them in future" (Amaro et al., 2010, p. 358). Because measurements were at baseline, post-intervention, and 6-month follow-up marks, this was a longitudinal study that provided congruent results to helping college student COAs improve their risky drinking behaviors. Overall, "participant's drinking decreased between baseline and 6 months" (Amaro et al., 2010, p. 361), along

with a reported lower frequency and quantity of drinking compared to their baselines. Lastly, participants also reported a decrease in alcohol-related consequences, a decrease in distress symptoms (such as coping with stress via alcohol), and an increase in readiness to change alcohol-related behaviors (Amaro et al., 2010).

These findings of decreased consequences involving alcohol consumption after sessions of motivational interviewing parallel those from a 1998 study by Marlatt et al. who found that “high-risk drinkers who participated in the BASICS program significantly reduced both drinking problems and alcohol consumption rates.” Moreover, in relation to the readiness to change aspect of BASICS, Roberts et al. (2000) discovered that an analysis of the behavioral alterations in individual student drinking overtime has also been found to be clinically significant for student COAs who go through the program. Furthermore, in a 2012 study by Fachini et al., who found that “after approximately 12 months of follow-up, students receiving BASICS showed a significant reduction in alcohol consumption,” there was a concluded great size affected, indicating the efficacy of the program. In this same study, the application of BASICS lowered both alcohol consumption and negative consequences in college students (Fachini et al., 2012), thus supporting the goals of the program in reducing these two factors.

All of these examples each obtain slight modifications to the participant recruitment and interviewing processes as well as the program’s length. However, they demonstrate overall harmonious results in analyzing the effectiveness of the BASICS program as a successful point of intervention for COAs. Altogether, the results from these studies indicate that, like the organization of the BASICS program, “a counselor-administered motivational interview plus feedback may be an ideal first-line intervention for heavy drinking college students,” (Fachini et al., 2012).

Concerns of Injustice and Diversity

Although the BASICS program has proven to be effective in positively intervening in the lives of student COAs and helping to stop the generational cycle of alcoholism prevalent amongst families where the topic is an issue, it would not be fair to ignore any concerns of injustice and diversity inherent to the topic. First, although BASICS is a great resource for college student COAs, because of its specifically curtailed audience, the program is inaccessible to COAs who do not attend college for various reasons, such as financial instability. This concern of injustice and diversity alone builds a boundary between privilege and accessibility. Next, since BASICS is again only designed for college students, younger COAs who are not yet in college are unable to participate and thus cannot benefit from receiving the kind of feedback and personal review to best assess themselves and understand the negative consequences they can endure from using alcohol as a means for coping in stressful situations. If the program was much broader to include a younger generation of COAs, these students would be exposed to the positive effects of BASICS much earlier on their lives, holding the potential to drastically decrease their risk of developing a reliance on alcohol and breaking the generational cycle of its dependency at a younger age.

On the other hand, however, if BASICS grew bigger beyond solely reaching college students so that both young adults and younger children who do not attend college can be included in the program, such as distributing the self-monitoring cards and personalized feedback packets online, the interpersonal aspect of the intervention, which plays a big role in its successful foundation, becomes lost. On this respect, it is also possible that the advantage of BASICS is related to the idea that “in-person interventions elicit a greater commitment or social desirability from the participants, which might in turn lead to changes in drinking behavior,” (Fachini et al., 2012, p. 8). In

other words, when the two sessions of the program involve establishing a personal connection between the student participant and the nurse administering the intervention, the student will be more likely to make a change in his or her drinking behaviors because he or she does not want to let the nurse down by showing little to no improvement at the program's conclusion.

Overall, there are reasonable arguments on both sides of ensuring that this point of intervention acknowledges any concerns of injustice and diversity, which should be highly considered when addressing such matters. Correspondingly, spiritual and faith-based approaches should also be explored when seeking additional resources to compliment the BASICS program.

Spiritual and Faith-Based Approaches

As stated earlier, alcoholism is the most prevalent mental health problem of adults in the United States, making this issue relatable. Often when one can relate to something or someone, coping with the issue becomes a little easier. For many, spiritual and faith-based approaches are the best ways to find this relatability, especially on the topic of alcoholism. According to Miller (1998), "there is strong evidence that spiritual involvement is a protective factor against alcohol abuse." An example of such an approach would be a COA using the power of his or her spirituality to recognize the generational pattern of alcoholism and rely on his or her faith to break that cycle. It is

important to note that this faith is not constrained to one particular religion but rather the belief in the concept of a higher power. The main connection within spiritual and faith-based approaches is that there is a power that is greater than the individual, and that it holds the capability to help him or her with his or her daily struggles. For instance, "higher levels of spirituality are associated with improved functioning in abstinence from alcohol abuse" (Bliss, 2007, p. 16). This means that, in addition to student COAs going through the BASICS program, if they have a spiritual relation to God, or a similar deity, and have faith that they can beat the odds of enacting the same alcoholic tendencies and behaviors that their parent(s) obtains, they will most likely be more equipped to cope with stressful situations and revert from turning to alcohol to aid them.

Conclusion

While there are many existing interventions out there for COAs, this particular point of intervention is outlined specifically for college students to lower both alcohol consumption and negative consequences associated with drinking. There are acknowledged concerns of injustice and diversity inherent to the topic as well as spiritual and faith-based approaches on how to manage and cope with stress in a healthy way by having a connection with and belief in a higher power, all of which hold the possibility to help college student COAs break the generational cycle of alcoholism.

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